



County of San Diego

JEAN M. SHEPARD

Acting Director

NANCY L. BOWEN, M.D., M.P.H.
PUBLIC HEALTH OFFICER

HEALTH AND HUMAN SERVICES AGENCY

PUBLIC HEALTH SERVICES

1700 PACIFIC HIGHWAY, SAN DIEGO, CALIFORNIA 92101-2417

(619) 515-6583 FAX (619) 515-6707

Emergency Medical Services

6255 Mission Gorge Road

San Diego, CA 92120

(619) 285-6429 Fax: (619) 285-6531

Children, Youth & Family Health Services
Disease Control/Epidemiology
Disease Prevention/Health Promotion
Emergency Medical Services
HIV/AIDS Services
Medical Quality Assurance
Public Health Laboratory
PH Nursing/Border Health
TB & STD Control
Vital Records

Gary M. Vilke, M.D., FACEP, FAAEM

Medical Director

Division of Emergency Medical Services

6255 Mission Gorge Road

San Diego, CA 92120-3599

(619) 285-6429 FAX:(619) 285-6531

E-mail: gmvilke@ucsd.edu

Medical Director's Update for Base Station Physicians Committee –April, 2004

San Diego County EMS:

Protocol Revisions are coming into the final stages.

San Diego County Medical Society EMS Oversight Committee met last week. The meetings of the SDCMS EMS Oversight Committee are the second Friday of each month at 09:30-11:00 at the San Diego County Medical Society.

Next month at the May 24th meeting, we will be discussing three topics that involve the pre-hospital to hospital interface. A strong turn-out on both sides will allow for some hopeful discussion and consensus on the best way to address these issues. The issues included:

- 1) Intubated patient airway turn-over guidelines – an attempt to standardize the process countywide to optimize patient care.
- 2) Patient report turn-over guidelines – to establish a best practice expectation of paramedics giving report to the emergency department staff. This may include time limit expectations.
- 3) Prehospital patient record (PPR) – determining barriers and possible solutions to getting PPRs left with essentially every patient delivered to an emergency department in real time.

Interosseous train the trainer class is April 28th at 12 noon to 3 pm at AMR. Please contact Les Gardina with any questions.

EMS Games date has been chosen: Friday September 10th from 8am until 5pm. Save the date- should be a fun day.

EMDAC met 3/23/04

Discussion on the development of **stroke centers**. To date, there are no regions in California taking on the concept of transporting patients to stroke centers. JCAHO stroke center certification was discussed as well as the position statements by ACEP and SAEM and AAEM.

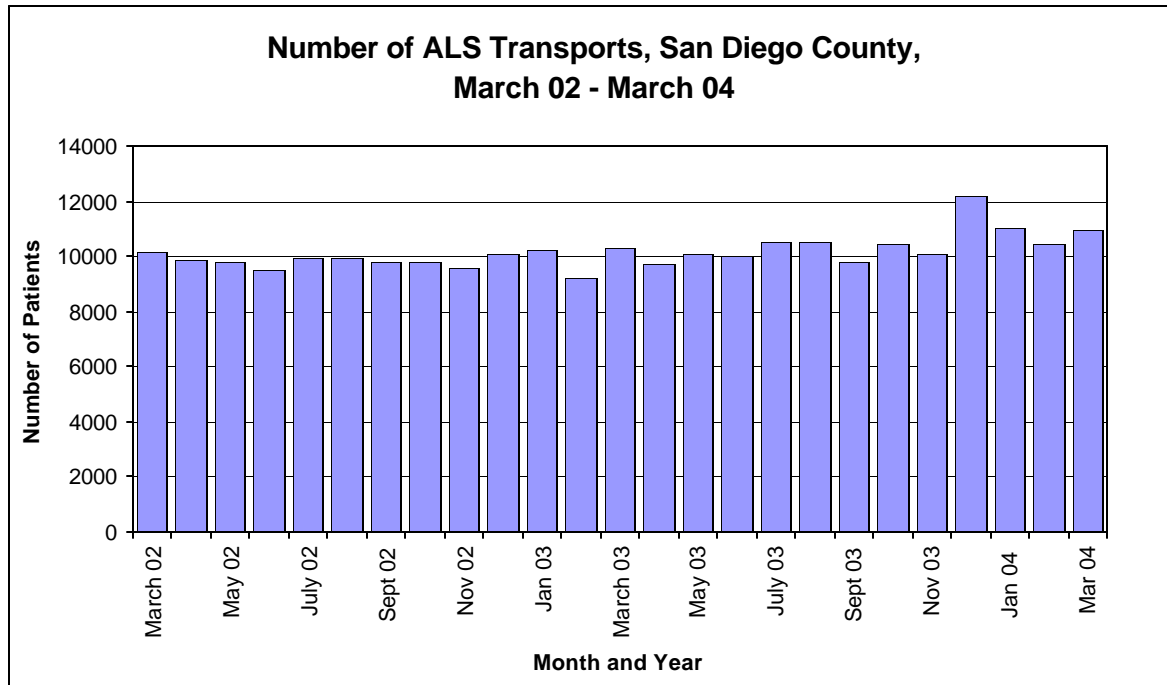
Acute coronary centers were discussed. There is interest in various regions to move in this direction of triaging ST segment Elevation Myocardial Infarction (STEMI) patients to facilities with emergency interventional cardiology availability.

AB 2293 was discussed. Language needs work. Apparently was developed to clear up local issues in a handful of counties, even though it affects the rest of the counties without perceived issues. Works to remove final decision process in local disputes to the state EMSA level, as well as defining who sits on EMCC (currently this is determined locally). EMDAC is not supporting this bill at this time, but is carefully watching the language changes.

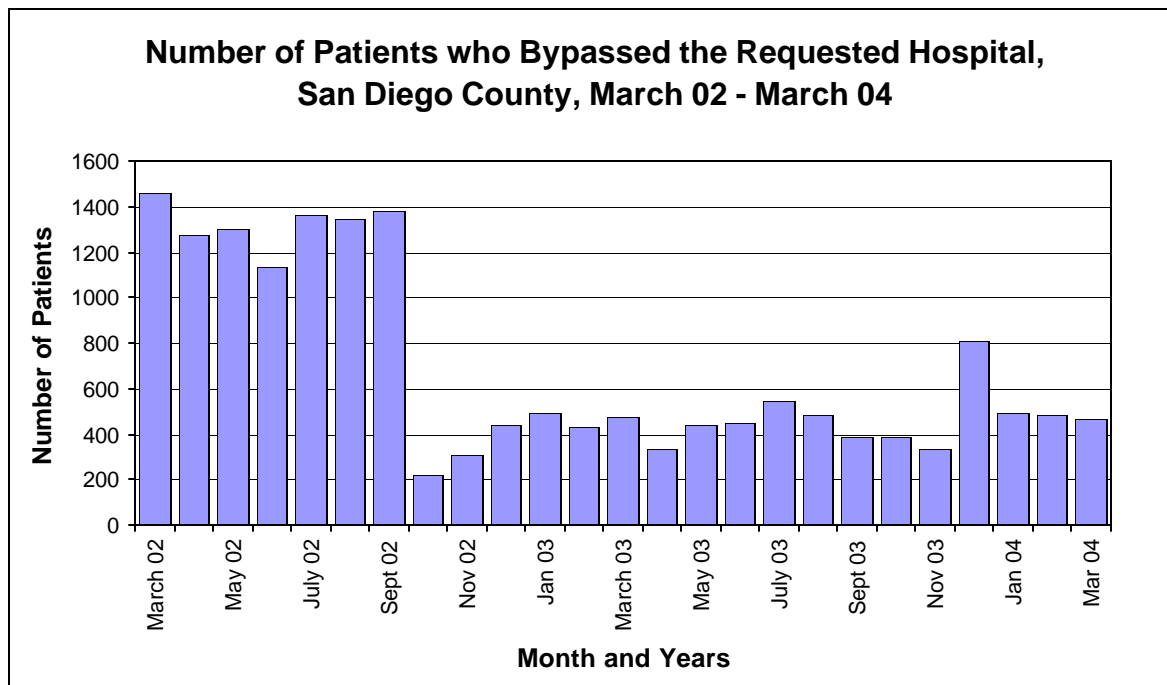
911 Surcharge Proposition: The jointly sponsored proposition by CMA, CAL-ACEP, and others plans to get enough signatures of support to get on the November ballot. This is the proposition that adds the 911 surcharge on phone bills to support various groups, including hospitals and emergency departments that take care of unfunded patients. The bill, previously without funded opposition, was apparently just recently opposed by the telecommunications industry, who is planning a highly funded campaign to defeat this proposition.

The state, under the governor is undergoing the California Performance Review (Appropriately known as CPR) to assess how the consolidation of departments will likely occur.

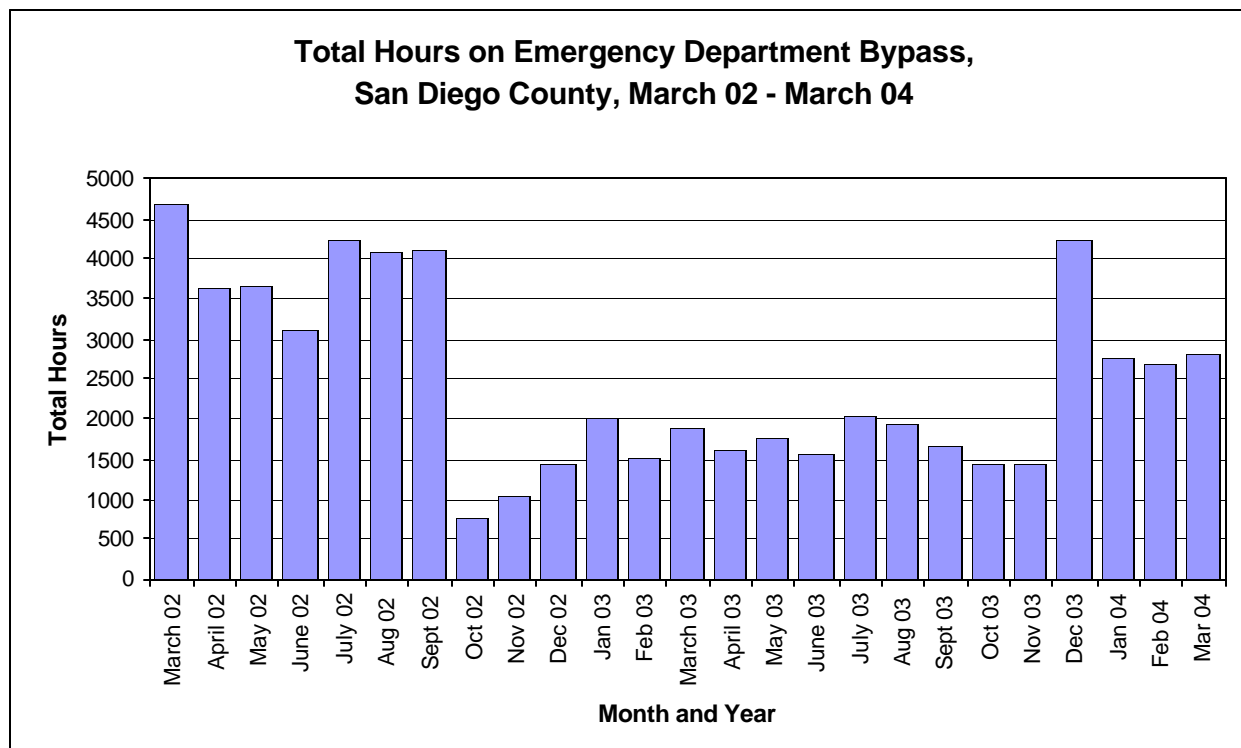
Below is the patient destination data in graphic form



Source: County of San Diego, Health and Human Services Agency, Division of Emergency Medical Services, MICN Records, March 2002 – March 2004



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